SERIAL NO. MULTIPLE DEPENDENT CLAIM FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AFTER
1st AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP.  $\Omega$ o į TO DE TO CL TOTAL Ļ TOTAL DEP. TOTAL CLAIMS •MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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